

10 F2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 9/215030	FILING DATE				
CLAIMS							*	*	*			
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1							1					
2							1					
3							1					
4							1					
5							1					
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7							1					
8							1					
9			5									
10	1											
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46		1										
47		1										
48		1										
49		1										
50		1										
TOTAL IND.							1					
TOTAL DEP.							1					
TOTAL CLAIMS							1					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

PFS
SAMPLE COPY

20F2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE		
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.				IND.
101		1								
102		1								
103		1								
104		1								
105		1								
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50										
TOTAL IND.	3									
TOTAL DEP.	106	↔	↓	↔	↓	↔	↓	↔	↓	
TOTAL CLAIMS	109									

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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